PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2004  10 / 749 75 8												8	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							1	SMALL TÝPE	EN1	IIIY	OR		THAN ENTITY
TO	OTAL CLAIMS	3						RATI	ET	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE		395.00	OR	BASIC FEE	790.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$.9	_	•	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X44=			OR	X88=	·
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+150:		<del></del>	1	+300=	
* If the difference in column 1 is less than zero, enter "0" in column 2									_		OR		
TOTAL OR TOTAL OTHER TH											THAN		
9	9/14/6 (Column 1) (Column 2) (Column 3)							SMAL	LEN	ΙΤΙΤΥ	OR	SMALL	
AMENDMENT A	· .	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE	٠	RATE	ADDI- TIONAL FEE
	Total	. 60	Minus	-60	)	= /		X\$ 9=			OR	X\$18=	
	Independent	• 7	Minus	***	2_			X44=	T		OR	X88=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+150=	1		OR	+300=	
									u –				
		(Column 1)		(Colum	າກ 2)	(Column 3)		ADDIT. FE	E		. 1	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	, 17	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=	T		OR	X\$18,=	
	Independent	*	Minus	***		=	İ	X44=	+		OR	X88=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEI	PENDENT	CLAIM			.150	十	$\neg \neg$		+300=	
								+150= TOTA	_		OR	TOTAL	
									Ē <b>L</b>		OR ,	ODIT. FEEL	
,,Τ		(Column 1) CLAIMS	1	(Colum	ST	(Column 3)	Г			DDI.	F	•	A'DE:
AMENDMENT C	•	REMAINING AFTER AMENDMENT	, ·.	NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total .	<b>*</b>	Minus	* **	•	e .	ŀ	X\$ 9=	†		OR	X\$18=	PCC
	Independent	•	Minuș	***	. •	=	H	X44=	+		-	X88=	
١٣	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+	<b>—</b>	DR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+300=	
H	the "Highest Nur	nn 1 is less man m nber Previously Pai mber Previously Pa	id For IN THI	S SPACE is I	less than	20, enter "20."	A	TOTAL DDIT, FEE			OR A	TOTAL DDIT. FEE	·
. 1	he "Highest Num	tiber Previously Paid ber Previously Paid	S For (Total or	independen	ics the i	highest nimit er	toún	d in the a	pipnopi	fate box i			

Application or Docket Number